OFFICIAL OEMS ATTENDANCE ROSTER

OEMS APPROVAL NUMBER

DATE:		*HOURS APPROVED
TIME(S):	TO	BASIC
TITLE:		INTERMEDIATE
SPONSOR:		PARAMEDIC
INSTRUCTOR	·	Timuminatio
	<u> </u>	
Provide copy of official OEM Provide complete and accura Report in writing any change	MS Approval Notice to EMT's when course is held. tte information in the spaces above. es to length, content, times, dates, etc to OEMS.	
5. Sign this roster in space(s) pr	umber hours program is approved for versus total length of program rovided. roster(s) directly to MDPH/OEMS no later than five working days a	
INSTRUCTIONS FOR EMTs AT	TTENDING COURSE:	
to OEMS. 2. Legibly PRINT and SIGN you 3. Review official OEMS appro	formation listed at top of this roster for your records. Review for account name after your six digit MA EMT number. Towal notice to check that program is approved and the actual number cial OEMS Approval number may never receive credit. Attendance	of credit hours awarded.
FAILURE TO SIGN THE A	TTENDANCE ROSTER MEANS THAT NO CREDIT (CAN BE AWARDED.
I attest that this is a true	record of attendanceSignature of Course	Sponsor or Instructor
MA EMT NUMBER	PRINT NAME	SIGNATURE

OFFICIAL OEMS ATTENDANCE ROSTER

OEMS APPROVAL NUMBER

(SEE INSTRUCTIONS ON NEXT PAGE)

MA EMT NUMBER	PRINT NAME	SIGNATURE

MASTER ATTENDANCE LIST FOR EMT-BASIC REFRESHER

OEMS APPROVAL NUMBER

DIRECTIONS:

- 1. Fill out the top section of this form and the OEMS Attendance rosters for each session completely and accurately and make enough copies to accommodate expected number of attendees and number of sessions scheduled.
- 2. Ensure that each EMT fills in the printed name, MA EMT number and signs each roster for every session.
- 3. Print legibly or type the MA EMT number and name of each EMT on this form. Enter dates of each session in the slots provided and enter attendance for each session with an (X) or $(\sqrt{})$ mark. Session(s) not attended should be marked with a (-) or (0). Enter written and practical exam grades in slots provided and enter actual number of hours attended in last box.
- 4. Draw a single line through the MA EMT number and name of any EMT(s) that either did not attend every session, and/or failed the written and/or practical examinations.
- 5. Sign the Master List and Attendance Rosters and send the original rosters directly to OEMS within five (5) working days from the end of the course. It is recommended that you use a traceable or verifiable method to send the Master List and rosters. You should make and keep copies of the Master List and rosters for your records.

FAILURE TO SIGN THE ATTENDANCE ROSTER(S) MEANS THAT NO CREDIT CAN BE AWARDED.

EMT-BASIC REFRESHER COURSE	COURSE SPONSOR:	
	LEAD INSTRUCTOR:	
	Signature of Lead Instructor or Course Coordinato	r

NOTE: Successful completion requires attending all mandatory topics and passing written and practical exams in the minimum 24 hours.

	DATES OF SESSIONS												
	EMT NUMBER	NAME (print or type)									PRACTICAL GRADE	WRITTEN GRADE	TOTAL HOURS
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MASTER ATTENDANCE LIST FOR EMT-PARAMEDIC REFRESHER

OEMS APPROVAL NUMBER

DIRECTIONS:

- 1. Fill out the top section of this form and the OEMS Attendance rosters for each session completely and accurately and make enough copies to accommodate expected number of attendees and number of sessions scheduled.
- 2. Ensure that each EMT fills in the printed name, MA EMT number and signs each roster for every session.
- 3. Print legibly or type the MA EMT number and name of each EMT on this form. Enter dates of each session in the slots provided and enter attendance for each session with an (X) or $(\sqrt{})$ mark. Session(s) not attended should be marked with a (-) or (0). Enter written and practical exam grades in slots provided and enter actual number of hours attended in last box.
- 4. Draw a single line through the MA EMT number and name of any EMT(s) that either did not attend every session, and/or failed the written and/or practical examinations.
- 5. Sign the Master List and Attendance Rosters and send the original rosters directly to OEMS within five (5) working days from the end of the course. It is recommended that you use a traceable or verifiable method to send the Master List and rosters. You should make and keep copies of the Master List and rosters for your records.

FAILURE TO SIGN THE ATTENDANCE ROSTER(S) MEANS THAT NO CREDIT CAN BE AWARDED.

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COURSE SPONSOR: _	
LEAD INSTRUCTOR:	

Signature of Lead Instructor or Course Coordinator

NOTE: Successful completion requires attending all mandatory topics and passing written and practical exams in the minimum 48 hours.

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1.	EMT NUMBER	NAME (print or type)							PRACTICAL GRADE	WRITTEN	TOTAL HOURS
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MASTER ATTENDANCE LIST - EMT-INTERMEDIATE ADD-ON REFRESHER

OEMS APPROVAL NUMBER

DIRECTIONS:

- 1. Fill out the top section of this form and the OEMS Attendance rosters for each session completely and accurately and make enough copies to accommodate expected number of attendees and number of sessions scheduled.
- 2. Ensure that each EMT fills in the printed name, MA EMT number and signs each roster for every session.
- 3. Print legibly or type the MA EMT number and name of each EMT on this form. Enter dates of each session in the slots provided and enter attendance for each session with an (X) or $(\sqrt{})$ mark. Session(s) not attended should be marked with a (-) or (0). Enter written and practical exam grades in slots provided and enter actual number of hours attended in last box.
- 4. Draw a single line through the MA EMT number and name of any EMT(s) that either did not attend every session, and/or failed the written and/or practical examinations.
- 5. Sign the Master List and Attendance Rosters and send the original rosters directly to OEMS within five (5) working days from the end of the course. It is recommended that you use a traceable or verifiable method to send the Master List and rosters. You should make and keep copies of the Master List and rosters for your records.

FAILURE TO SIGN THE ATTENDANCE ROSTER(S) MEANS THAT NO CREDIT CAN BE AWARDED.

EMT-I ADD-ON REFRESHER COU	RSE
ENTI-INDD-ON KETKESHEK COC	INDL

COURSE SPONSOR:	
LEAD INSTRUCTOR	

Signature of Lead Instructor or Course Coordinator

NOTE: Successful completion requires attending all mandatory topics and passing written and practical exams in the minimum 12 hours.

	DATES OF SESSIONS												
	EMT NUMBER	NAME (print or type)									PRACTICAL GRADE	WRITTEN GRADE	TOTAL HOURS
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MASTER ATTENDANCE LIST FOR MULTI-SESSION PROGRAM

OEMS APPROVAL NUMBER

DIRECTIONS:

- 1. Fill out the top section of this form and the OEMS Attendance rosters for each session completely and accurately and make enough copies to accommodate expected number of attendees and number of sessions scheduled.
- 2. Ensure that each EMT fills in the printed name, MA EMT number and signs each roster for every session.
- 3. Print legibly or type the MA EMT number and name of each EMT on this form. Enter dates of each session in the slots provided and enter attendance for each session with an (X) or $(\sqrt{})$ mark. Session(s) not attended should be marked with a (-) or (0). Enter actual number of hours attended in last box.
- 4. Draw a single line through the MA EMT number and name of any EMT(s) that either did not attend every session, and/or otherwise failed to successfully complete all program requirements.
- 5. Sign the Master List and Attendance Rosters and send the original rosters directly to OEMS within five (5) working days from the end of the course. It is recommended that you use a traceable or verifiable method to send the Master List and rosters. You should make and keep copies of the Master List and rosters for your records.

FAILURE TO SIGN THE ATTENDANCE ROSTER(S) MEANS THAT NO CREDIT CAN BE AWARDED.

PROGRAM TITLE:	COURSE SPONSOR:			
	LEAD INSTRUCTOR:			

Signature of Lead Instructor or Course Coordinator

NOTE: Original attendance rosters must Accompany this Master List.

1.	EMT NUMBER	NAME (print or type)					PRACTICAL GRADE	WRITTEN GRADE	TOTAL HOURS
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